

**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)**

Docket Number (Optional)

42390P11705

| | |
|---|---------------------------------|
| In re Application of Hong Wang, et al. | |
| Application Number | Filed |
| 09/966,458 | 9/28/2001 |
| For Configurable System Monitoring for Dynamic Optimization of Program Execution | |
| Group Art Unit 2122 | Examiner YIGDALL, Michael J. |

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing an Amendment and Response to Office Action in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows
(check time period desired):

| | |
|--|----------|
| <input checked="" type="checkbox"/> One Month (37 CFR 1.17(a)(1)) | \$120.00 |
| <input type="checkbox"/> Two Months (37 CFR 1.17(a)(2)) | \$_____ |
| <input type="checkbox"/> Three Months (37 CFR 1.17(a)(3)) | \$_____ |
| <input type="checkbox"/> Four Months (37 CFR 1.17(a)(4)) | \$_____ |
| <input type="checkbox"/> Five Months (37 CFR 1.17(a)(5)) | \$_____ |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is <u>\$60.00</u> . | |
| <input checked="" type="checkbox"/> A check in the amount of the fee is enclosed. | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. | |
| <input type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account Number <u>02-2666</u> . I have enclosed a duplicate copy of the Fee Transmittal. | |

I am the applicant/inventor.

assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

attorney or agent of record.

attorney or agent acting under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a). 39,865.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2039.

December 15, 2004

Date

503-439-8778

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Signature

Mark C. Van Ness

Typed or printed name

Total of _____ forms are submitted.

Based on PTO/SB/22 (08-03) as modified by Blakely, Solokoff, Taylor & Zafman (w/r) 08/11/2003.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450